

DOCKET NO. JBP-5012

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Librizzi et al.

Serial No.: 10/650,495

Art Unit: 1751

Filed : August 28, 2003

Examiner:

For : MILD AND EFFECTIVE CLEANSING COMPOSITIONS

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Missing Parts, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

January 30, 2004

(Date of Deposit)

Michele G. Mangini

(Name of applicant, assignee, or Registered Representative)

(Signature)

January 30, 2004

(Date of Signature)

Mail Stop Missing Parts
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

SUBMISSION OF COMBINED DECLARATION AND POWER OF ATTORNEY

Dear Sir:

Pursuant to Rule 53(f) and Rule 54, please find enclosed a Combined Declaration and Power of Attorney for the application of Joseph Librizzi et al. et al. entitled MILD AND EFFECTIVE CLEANSING COMPOSITIONS, attorney Docket No. JBP-5012, to complete, pursuant to Rule 51, this application filed on August 28, 2003 by Express Mail pursuant to Rule 10. As required, a copy of the Notice to File Missing Parts of Application is also attached.

Please charge Johnson & Johnson Deposit Account No. 10-0750/JBP5012/MGM in the amounts of \$130.00 for submission of the Declaration pursuant to Section 1.16(e). The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Account No. 10-0750/JBP-5012/MGM. This sheet is submitted in triplicate.

Respectfully submitted,

Michele G. Mangini
Reg. No. 36 806
Attorney for Applicant(s)

Johnson & Johnson
One Johnson & Johnson Plaza
New Brunswick, NJ 08933-7003
(732) 524-2810

DECLARATION - Utility or Design Patent Application												
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Applicati n Number(s)</th> <th style="text-align: center; padding: 2px;">Filing Date (MM/DD/YYYY)</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> </tr> </tbody> </table>	Applicati n Number(s)	Filing Date (MM/DD/YYYY)			<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Filing Date (MM/DD/YYYY)</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> </tr> </tbody> </table>	Filing Date (MM/DD/YYYY)		<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto				
Applicati n Number(s)	Filing Date (MM/DD/YYYY)											
Filing Date (MM/DD/YYYY)												
I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application												
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Application Serial No.</th> <th style="text-align: center; padding: 2px;">Filing Date</th> <th style="text-align: center; padding: 2px;">Status</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td></td> <td>Patented Patented Patented</td> </tr> </tbody> </table>	Application Serial No.	Filing Date	Status			Patented Patented Patented	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: center; padding: 2px;">Filing Date</th> <th style="text-align: center; padding: 2px;">Status</th> </tr> </thead> <tbody> <tr> <td style="height: 40px;"></td> <td>Patented Patented Patented</td> </tr> </tbody> </table>		Filing Date	Status		Patented Patented Patented
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	Patented Patented Patented											
I hereby appoint: <div style="float: right; text-align: right;"> Place Customer Number Bar Code Label Here </div> <div style="clear: both;"></div> <div style="margin-top: 10px;"> <input checked="" type="checkbox"/> Practitioners at Customer Number 000027777 </div> <div style="margin-top: 10px;"> AND </div> <div style="margin-top: 10px;"> <input type="checkbox"/> Practitioner(s) named below: <div style="display: flex; justify-content: space-between; margin-top: 5px;"> <u>Name</u> <u>Registration Number</u> </div> </div>												
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.												
Address all telephone calls to Michele G. Mangini at telephone number (732) 524-2976												
Direct all correspondence to: <div style="display: flex; justify-content: space-between; align-items: center; margin-top: 5px;"> <div> Customer Number <input checked="" type="checkbox"/> or Bar Code Label </div> <div style="border: 1px solid black; padding: 0 20px;">000027777</div> <div>OR</div> <div> <input type="checkbox"/> Correspondence address below </div> </div>												
Name:												
Address:												
Address:												
City:	State:	ZIP:										
Country:	Telephone:	Fax:										

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Joseph

Family Name
or Surname LIBRIZZI

Inventor's
Signature

Date

Residence: City Hillsborough

State NJ

Country U.S.

Citizenship U.S.

Mailing Address 19 Norz Drive

City Hillsborough

State NJ

ZIP 08844

Country U.S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SECOND INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Alison

Family Name
or Surname MARTIN

Inventor's
Signature

Date

Residence: City Lawrenceville

State NJ

Country U.S.

Citizenship U.S.

Mailing Address 13123 East Run Drive

City Lawrenceville

State NJ

ZIP 08648

Country U.S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF THIRD INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name
(first and middle (if any)) Irina

Family Name
or Surname GANOPOLSKY

Inventor's
Signature

Date

Residence: City Lawrenceville

State NJ

Country U.S.

Citizenship U.S.

Mailing Address 1508 White Pine Circle

City Lawrenceville

State NJ

ZIP 08648

Country U.S.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

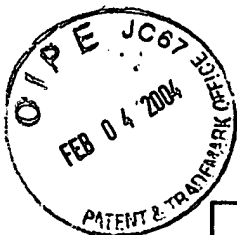
NAME OF FOURTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Elvin R		Family Name or Surname LUKENBACH	
Inventor's Signature		Date	
Residence: City Flemington	State NJ	Country U.S.	Citizenship U.S.
Mailing Address 160 Klinesville Road			
City Flemington	State NJ	ZIP 08822	Country U.S.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF FIFTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any)) Michael W		Family Name or Surname Eknoian	
Inventor's Signature		Date	
Residence: City Warren	State NJ	Country U.S.A.	Citizenship U.S.A.
Mailing Address 8 Birchmont Lane			
City Warren	State NJ	ZIP 07059	Country U.S.A.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.			
NAME OF SIXTH INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City	State	Country	Citizenship
Mailing Address			
City	State	ZIP	Country



Please type a plus sign (+) inside this box ☐

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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION AND POWER OF ATTORNEY FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (Surcharge (37 CFR 1.16(e)) required) OR	Attorney Docket Number	JBP-5012			
	First Named Inventor	Joseph LiBrizzi et al.			
	COMPLETE IF KNOWN				
	Application Number	10/650,495			
	Filing Date	August 28, 2003			
	Group Art Unit				
	Examiner Name				
As a below named inventor, I hereby declare that: My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: MILD AND EFFECTIVE CLEANSING COMPOSITIONS <i>(Title of the Invention)</i> the specification of which <input type="checkbox"/> is attached hereto OR <input checked="" type="checkbox"/> is identified by Attorney Docket Number JBP-5012, which appeared on the specification as filed on 28 August 2003 I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.					
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO	
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:					



DECLARATION - Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

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Application Serial No.	Filing Date	Status
		Patented Patented Patented

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AND

☐ Practitioner(s) named below:
Name Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Address all telephone calls to Michele G. Mangini at telephone number (732) 524-2976.

Direct all correspondence to: Customer Number
☒ or Bar Code Label **000027777** OR ☐ Correspondence address below

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Address:

City:

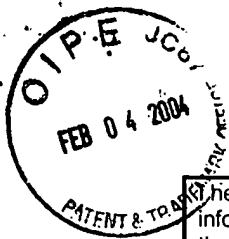
State:

ZIP

Country

Telephone:

Fax:



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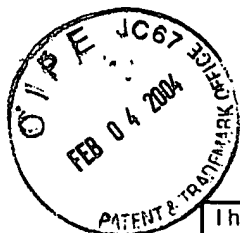
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Joseph		Family Name or Surname LIBRIZZI	
Inventor's Signature <i>J. L. M.</i>		Date 1/5/2004	
Residence: City Hillsborough	State NJ	Country U.S.	Citizenship U.S.
Mailing Address 19 Norz Drive			
City Hillsborough	State NJ	ZIP 08844	Country U.S.

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NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Alison		Family Name or Surname MARTIN	
Inventor's Signature <i>Alison Martin</i>		Date 1/5/04	
Residence: City Lawrenceville	State NJ	Country U.S.	Citizenship U.S.
Mailing Address 13123 East Run Drive			
City Lawrenceville	State NJ	ZIP 08648	Country U.S.

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NAME OF THIRD INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) Irina		Family Name or Surname GANOPOLSKY	
Inventor's Signature		Date	
Residence: City Lawrenceville	State NJ	Country U.S.	Citizenship U.S.
Mailing Address 1508 White Pine Circle			
City Lawrenceville	State NJ	ZIP 08648	Country U.S.



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NAME OF FOURTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Elvin R.

Family Name

or Surname LUKENBACH

Inventor's
Signature

Elvin R. Lukenbach

Date

Jan 5, 2004

Residence: City Flemington

State NJ

Country U.S.

Citizenship U.S.

Mailing Address 160 Klinesville Road

City Flemington

State NJ

ZIP 08822

Country U.S.

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NAME OF FIFTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any]) Michael W.

Family Name

or Surname Eknoian

Inventor's
Signature

Michael W. Eknoian

Date

01/05/2004

Residence: City Warren

State NJ

Country U.S.A.

Citizenship U.S.A.

Mailing Address 8 Birchmont Lane

City Warren

State NJ

ZIP 07059

Country U.S.A.

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NAME OF SIXTH INVENTOR:

☐ A petition has been filed for this unsigned inventor

Given Name

(first and middle [if any])

Family Name

or Surname

Inventor's
Signature

Date

Residence: City

State

Country

Citizenship

Mailing Address

City

State

ZIP

Country